

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

MasterCard International Inc. Employees' PAC

ADDRESS (number and street)

2000 Purchase St.

☐Check if different  
than previously  
reported. (ACC)

Purchase

NY

10577

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00410274

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the  
State of(d) 30-Day  
Post -Election  
Report for the:☒

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

through

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Christine Maiolo

Signature of Treasurer

Electronically Filed by Christine Maiolo

Date

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

A. Form/Schedule : **F3X**

Transaction ID :

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

3 / 47

Write or Type Committee Name

MasterCard International Inc. Employees' PAC

Report Covering the Period:

From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	81932.47
(b) Cash on Hand at Beginning of Reporting Period .....	94926.55	
(c) Total Receipts (from Line 19) .....	16827.00	122203.50
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	111753.55	204135.97
7. Total Disbursements (from Line 31) .....	7261.32	99643.74
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	104492.23	104492.23
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

4 / 47

Write or Type Committee Name

MasterCard International Inc. Employees' PAC

Report Covering the Period:

From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	13897.00	108083.00
(ii) Unitemized .....	430.00	11620.50
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	14327.00	119703.50
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	14327.00	119703.50
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	2500.00	2500.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	16827.00	122203.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	16827.00	122203.50

## DETAILED SUMMARY PAGE

of Disbursements

5 / 47

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	261.32	1259.75	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	261.32	1259.75	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7000.00	97750.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00	
29. Other Disbursements.....	0.00	633.99	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	7261.32	99643.74	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7261.32	99643.74	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

6 / 47

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	14327.00	119703.50
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	14327.00	119703.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	261.32	1259.75
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	261.32	1259.75

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 / 47

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Wayne Borgmeyer

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Consultant, Software Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-9-14-50

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Angela Borgsmiller

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Consultant, Business Support

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-24-14-50

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Gregory Box

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP Technology Account Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

682.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-5-14-55

Amount of Each Receipt this Period

62.00

**SUBTOTAL** of Receipts This Page (optional) .....

102.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 / 47

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Gregory Box

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP Technology Account Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

682.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-5-14-50

Amount of Each Receipt this Period

62.00

**B.**

Full Name (Last, First, Middle Initial)

Joe Casale

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Business Leader, Product Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-65-14-55

Amount of Each Receipt this Period

75.00

**C.**

Full Name (Last, First, Middle Initial)

Joe Casale

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Business Leader, Product Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-65-14-50

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional) .....

212.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 47

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Andrew Cheskis

Mailing Address 100 Manhattanville Rd

City

State

Zip Code

Purchase

NY

10577-2134

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

SVP/General Auditor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3400.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-15-14-55

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Andrew Cheskis

Mailing Address 100 Manhattanville Rd

City

State

Zip Code

Purchase

NY

10577-2134

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

SVP/General Auditor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3400.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-15-14-50

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

Michael Cyr

Mailing Address 2000 Purchase St

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Team Leader-Member Relation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-34-14-50

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional) .....

620.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Diane Dann

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Counsel Sr

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-20-14-55

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Diane Dann

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Counsel Sr

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-20-14-50

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Heidi Davidson

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Director State Govt Affairs

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3850.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-30-14-55

Amount of Each Receipt this Period

350.00

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Heidi Davidson

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Director State Govt Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3850.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-30-14-50

Amount of Each Receipt this Period

350.00

**B.**

Full Name (Last, First, Middle Initial)

Colm Dobbyn

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

SVP/Asst. General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-19-14-55

Amount of Each Receipt this Period

125.00

**C.**

Full Name (Last, First, Middle Initial)

Colm Dobbyn

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

SVP/Asst. General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-19-14-50

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Nadia Dombrowski

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Counsel Sr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-54-14-55

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

Nadia Dombrowski

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Counsel Sr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-54-14-50

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Patrick Dwyer

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Consumer & Public Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-48-14-55

Amount of Each Receipt this Period

26.00

**SUBTOTAL** of Receipts This Page (optional) .....

86.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Patrick Dwyer

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Consumer &amp; Public Affairs

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	1	0

Transaction ID: 20101111-48-14-50

Amount of Each Receipt this Period

26.00

**B.**

Full Name (Last, First, Middle Initial)

Michael Ellison

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	5	/	2	0	1	0

Transaction ID: 20101013-42-14-55

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Michael Ellison

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	1	0

Transaction ID: 20101111-42-14-50

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) .....

226.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Tucker Foote

Mailing Address 1401 I St NW  
Ste 2

City State Zip Code  
Washington DC 20005-2225

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MasterCard

Occupation  
Business Leader, Public Policy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 1 / 2 0 1 0

Transaction ID: 05A35760854E71FD52A

Amount of Each Receipt this Period

125.00

**B.**

Full Name (Last, First, Middle Initial)

Tucker Foote

Mailing Address 1401 I St NW  
Ste 2

City State Zip Code  
Washington DC 20005-2225

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MasterCard

Occupation  
Business Leader, Public Policy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 1 / 2 0 1 0

Transaction ID: B088C1CC9AE59DDD46D

Amount of Each Receipt this Period

125.00

**C.**

Full Name (Last, First, Middle Initial)

Gene Galliani

Mailing Address 2200 Mastercard Blvd

City State Zip Code  
O Fallon MO 63368-7263

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MasterCard

Occupation  
Leader, Systems Programming

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-41-14-55

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Gene Galliani

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Leader, Systems Programming

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-41-14-50

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Thomas Gannon

Mailing Address 1401 I St NW  
Ste 2

City

Washington

State

DC

Zip Code

20005-2225

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Business Leader, Public Policy

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-69-14-55

Amount of Each Receipt this Period

115.00

**C.**

Full Name (Last, First, Middle Initial)

Thomas Gannon

Mailing Address 1401 I St NW  
Ste 2

City

Washington

State

DC

Zip Code

20005-2225

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Business Leader, Public Policy

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-69-14-50

Amount of Each Receipt this Period

115.00

**SUBTOTAL** of Receipts This Page (optional) .....

280.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Bart Goldstein

Mailing Address 2000 Purchase St

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Group Head, Sec and Governance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-59-14-55

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Bart Goldstein

Mailing Address 2000 Purchase St

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Group Head, Sec and Governance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-59-14-50

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Maria Haluska

Mailing Address 2000 Purchase St

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Leader, Shareholder Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-26-14-55

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional) .....

175.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Maria Haluska

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Leader, Shareholder Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-26-14-50

Amount of Each Receipt this Period

125.00

**B.**

Full Name (Last, First, Middle Initial)

Dora Hanft

Mailing Address 670 W End Ave

City

New York

State

NY

Zip Code

10025-7313

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Spouse of Employee

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2288.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 1 / 2 0 1 0

Transaction ID: 243ECCDD5E2B47C3EBB

Amount of Each Receipt this Period

208.00

**C.**

Full Name (Last, First, Middle Initial)

Dora Hanft

Mailing Address 670 W End Ave

City

New York

State

NY

Zip Code

10025-7313

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Spouse of Employee

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2288.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 1 / 2 0 1 0

Transaction ID: EBD943F27C0FC6C3896

Amount of Each Receipt this Period

208.00

**SUBTOTAL** of Receipts This Page (optional) .....

541.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Noah Hanft

Mailing Address 2000 Purchase St

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

General Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4576.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-12-14-55

Amount of Each Receipt this Period

416.00

**B.**

Full Name (Last, First, Middle Initial)

Noah Hanft

Mailing Address 2000 Purchase St

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

General Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4576.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-12-14-50

Amount of Each Receipt this Period

416.00

**C.**

Full Name (Last, First, Middle Initial)

Robert Hariegel

Mailing Address 2000 Purchase St

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Leader, Strategic Sourcing

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-25-14-55

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

882.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Robert Hariegel

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Leader, Strategic Sourcing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-25-14-50

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Ken Hayes

Mailing Address 8755 W Higgins Rd

City

Chicago

State

IL

Zip Code

60631-2708

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Member Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-50-14-50

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Justin Howe

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Finance Leader, Financial Analysis

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1837.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-47-14-55

Amount of Each Receipt this Period

167.00

**SUBTOTAL** of Receipts This Page (optional) .....

237.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Justin Howe

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Finance Leader, Financial Analysis

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1837.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-47-14-50

Amount of Each Receipt this Period

167.00

**B.**

Full Name (Last, First, Middle Initial)

Greg Howes

Mailing Address PO Box 25000

City

Raleigh

State

NC

Zip Code

27640-0100

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Global Solutions Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-58-14-55

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Greg Howes

Mailing Address PO Box 25000

City

Raleigh

State

NC

Zip Code

27640-0100

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Global Solutions Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-58-14-50

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

367.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Dale Jenkins

Mailing Address 11907 Butternut Ln

City

Farragut

State

TN

Zip Code

37934-4657

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Consultant, Business Analysis

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-56-14-55

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Dale Jenkins

Mailing Address 11907 Butternut Ln

City

Farragut

State

TN

Zip Code

37934-4657

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Consultant, Business Analysis

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-56-14-50

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Joan Kelly

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

SVP/Systems Enhancement Stratg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3190.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-2-14-55

Amount of Each Receipt this Period

290.00

**SUBTOTAL** of Receipts This Page (optional) .....

340.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Joan Kelly

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

SVP/Systems Enhancement Stratg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3190.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-2-14-50

Amount of Each Receipt this Period

290.00

**B.**

Full Name (Last, First, Middle Initial)

Claire Le Gal

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2509

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Business Leader, Fraud Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-22-14-55

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Claire Le Gal

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2509

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Business Leader, Fraud Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-22-14-50

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

390.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Randall Leonard

Mailing Address 5555 Winghaven Blvd

City

O Fallon

State

MO

Zip Code

63368-3625

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Systems Development

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-4-14-55

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Randall Leonard

Mailing Address 5555 Winghaven Blvd

City

O Fallon

State

MO

Zip Code

63368-3625

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Systems Development

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-4-14-50

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Michael Manchisi

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

SVP/Operations

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4576.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-16-14-55

Amount of Each Receipt this Period

416.00

**SUBTOTAL** of Receipts This Page (optional) .....

466.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Michael Manchisi

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

SVP/Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4576.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-16-14-50

Amount of Each Receipt this Period

416.00

**B.**

Full Name (Last, First, Middle Initial)

Kimberly Martin

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Systems Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-3-14-55

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

Kimberly Martin

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Systems Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-3-14-50

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional) .....

496.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Jim Masterson

Mailing Address 2000 Purchase St

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Counsel Sr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-43-14-50

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Chris McWilton

Mailing Address 2000 Purchase St

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4576.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-45-14-55

Amount of Each Receipt this Period

416.00

**C.**

Full Name (Last, First, Middle Initial)

Chris McWilton

Mailing Address 2000 Purchase St

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4576.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-45-14-50

Amount of Each Receipt this Period

416.00

**SUBTOTAL** of Receipts This Page (optional) .....

852.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

John Meister

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Systems Development

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-10-14-55

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

John Meister

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Systems Development

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-10-14-50

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Shawn Miles

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Counsel Sr

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-17-14-55

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Shawn Miles

Mailing Address 2000 Purchase St

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Counsel Sr

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-17-14-50

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Timothy Murphy

Mailing Address 2000 Purchase St

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Associate General Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4576.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-31-14-55

Amount of Each Receipt this Period

416.00

**C.**

Full Name (Last, First, Middle Initial)

Timothy Murphy

Mailing Address 2000 Purchase St

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Associate General Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4576.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-31-14-50

Amount of Each Receipt this Period

416.00

**SUBTOTAL** of Receipts This Page (optional) .....

932.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Heather Nolan

Mailing Address 2000 Purchase St

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Business Leader, Franchise Management

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-32-14-55

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Heather Nolan

Mailing Address 2000 Purchase St

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Business Leader, Franchise Management

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-32-14-50

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Patrick O'Sullivan

Mailing Address 2000 Purchase St

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1364.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-14-14-55

Amount of Each Receipt this Period

124.00

**SUBTOTAL** of Receipts This Page (optional) .....

224.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Patrick O'Sullivan

Mailing Address 2000 Purchase St

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1364.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-14-14-50

Amount of Each Receipt this Period

124.00

**B.**

Full Name (Last, First, Middle Initial)

John Pagano

Mailing Address 2000 Purchase St

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Accounting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-46-14-55

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

John Pagano

Mailing Address 2000 Purchase St

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Accounting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-46-14-50

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

174.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Steve Potter

Mailing Address 9830 Colonnade Blvd  
Ste 170

City State Zip Code  
San Antonio TX 78230-2297

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MasterCard

Occupation  
Account Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-67-14-55

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Steve Potter

Mailing Address 9830 Colonnade Blvd  
Ste 170

City State Zip Code  
San Antonio TX 78230-2297

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MasterCard

Occupation  
Account Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-67-14-50

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Bob Reany

Mailing Address 2200 Mastercard Blvd

City State Zip Code  
O Fallon MO 63368-7263

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MasterCard

Occupation  
VP/Information Tech

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1210.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-8-14-55

Amount of Each Receipt this Period

110.00

**SUBTOTAL** of Receipts This Page (optional) .....

310.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Bob Reany

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Information Tech

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1210.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-8-14-50

Amount of Each Receipt this Period

110.00

**B.**

Full Name (Last, First, Middle Initial)

Rob Reeg

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

SVP/Systems Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4576.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-7-14-55

Amount of Each Receipt this Period

416.00

**C.**

Full Name (Last, First, Middle Initial)

Rob Reeg

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

SVP/Systems Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4576.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-7-14-50

Amount of Each Receipt this Period

416.00

**SUBTOTAL** of Receipts This Page (optional) .....

942.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Trina Reuben-Williams

Mailing Address 100 Manhattanville Rd

City

State

Zip Code

Purchase

NY

10577-2134

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Managing Consultant

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-57-14-55

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

Trina Reuben-Williams

Mailing Address 100 Manhattanville Rd

City

State

Zip Code

Purchase

NY

10577-2134

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Managing Consultant

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-57-14-50

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

Nat Paul Rosenberg

Mailing Address 8755 W Higgins Rd

City

State

Zip Code

Chicago

IL

60631-2708

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Team Lead NA Business Dev

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-23-14-55

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional) .....

120.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Nat Paul Rosenberg

Mailing Address 8755 W Higgins Rd

City

Chicago

State

IL

Zip Code

60631-2708

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Team Lead NA Business Dev

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-23-14-50

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

Richard Santoro

Mailing Address 1401 I St NW  
Ste 2

City

Washington

State

DC

Zip Code

20005-2225

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Business Leader, Public Policy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-68-14-55

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Richard Santoro

Mailing Address 1401 I St NW  
Ste 2

City

Washington

State

DC

Zip Code

20005-2225

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Business Leader, Public Policy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-68-14-50

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

240.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Joe Schuler

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Leader, Systems Programming

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

935.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-38-14-55

Amount of Each Receipt this Period

85.00

**B.**

Full Name (Last, First, Middle Initial)

Joe Schuler

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Leader, Systems Programming

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

935.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-38-14-50

Amount of Each Receipt this Period

85.00

**C.**

Full Name (Last, First, Middle Initial)

Jerri Sculley

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Business Leader, Billing Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-11-14-50

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional) .....

190.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Eileen Simon

Mailing Address 2000 Purchase St

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Associate General Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-27-14-55

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Eileen Simon

Mailing Address 2000 Purchase St

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Associate General Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-27-14-50

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Edgar Smart

Mailing Address 2200 Mastercard Blvd

City

State

Zip Code

O Fallon

MO

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Systems Support

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1364.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-28-14-55

Amount of Each Receipt this Period

124.00

**SUBTOTAL** of Receipts This Page (optional) .....

324.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Edgar Smart

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Systems Support

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1364.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-28-14-50

Amount of Each Receipt this Period

124.00

**B.**

Full Name (Last, First, Middle Initial)

Bella Stavchansky

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

General Manager, Eastern Europe

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-18-14-55

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Bella Stavchansky

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

General Manager, Eastern Europe

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-18-14-50

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional) .....

208.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Joseph Swezey

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1364.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-33-14-55

Amount of Each Receipt this Period

124.00

**B.**

Full Name (Last, First, Middle Initial)

Joseph Swezey

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1364.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-33-14-50

Amount of Each Receipt this Period

124.00

**C.**

Full Name (Last, First, Middle Initial)

Donna Terman

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Bus Resources-Communication

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-29-14-55

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional) .....

398.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Donna Terman

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Bus Resources-Communication

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-29-14-50

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

Stephen Treacy

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Business Leader, Fraud Reporting and A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.50

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-63-14-55

Amount of Each Receipt this Period

37.50

**C.**

Full Name (Last, First, Middle Initial)

Stephen Treacy

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Business Leader, Fraud Reporting and A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.50

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-63-14-50

Amount of Each Receipt this Period

37.50

**SUBTOTAL** of Receipts This Page (optional) .....

225.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Robert Trende

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Systems Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-1-14-55

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Robert Trende

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Systems Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-1-14-50

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Frank Tufano

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Group Head Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3190.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-52-14-55

Amount of Each Receipt this Period

290.00

**SUBTOTAL** of Receipts This Page (optional) .....

390.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Frank Tufano

Mailing Address 2000 Purchase St

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Group Head Finance

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3190.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-52-14-50

Amount of Each Receipt this Period

290.00

**B.**

Full Name (Last, First, Middle Initial)

Jeroen Van Erven

Mailing Address 2000 Purchase St

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-37-14-55

Amount of Each Receipt this Period

125.00

**C.**

Full Name (Last, First, Middle Initial)

Jeroen Van Erven

Mailing Address 2000 Purchase St

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-37-14-50

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional) .....

540.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Kathi Weber

Mailing Address 5555 Winghaven Blvd

City

O Fallon

State

MO

Zip Code

63368-3625

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Senior Business Leader, Customer Suppo

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-64-14-50

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Timothy Westendorf

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Financial Systems

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-35-14-55

Amount of Each Receipt this Period

75.00

**C.**

Full Name (Last, First, Middle Initial)

Timothy Westendorf

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Financial Systems

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-35-14-50

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional) .....

170.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Mimi Wood

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1364.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-40-14-55

Amount of Each Receipt this Period

124.00

**B.**

Full Name (Last, First, Middle Initial)

Mimi Wood

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1364.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-40-14-50

Amount of Each Receipt this Period

124.00

**C.**

Full Name (Last, First, Middle Initial)

Kent Young

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Business Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1430.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-39-14-55

Amount of Each Receipt this Period

130.00

**SUBTOTAL** of Receipts This Page (optional) .....

378.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Kent Young

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

VP/Business Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1430.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-39-14-50

Amount of Each Receipt this Period

130.00

**B.**

Full Name (Last, First, Middle Initial)

Kelly Zabel

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Audit Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: 20101013-51-14-55

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

Kelly Zabel

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard

Occupation

Audit Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Transaction ID: 20101111-51-14-50

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional) .....

210.00

**TOTAL** This Period (last page this line number only) .....

13897.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 47

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

Castle Campaign Fund

Mailing Address PO Box 133

City

Wilmington

State

DE

Zip Code

19899

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 9 / 2 0 1 0

Transaction ID: 3D655FF39A29E71C0B1

Amount of Each Receipt this Period

2500.00

Refund of 9/10/2010 Contr-  
ibution

**SUBTOTAL** of Receipts This Page (optional) .....

2500.00

**TOTAL** This Period (last page this line number only) .....

2500.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 45 / 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

PNC Bank

Mailing Address 411 King St.

City  
Alexandria

State  
VA

Zip Code  
22314

Purpose of Disbursement  
Check Printing Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 386365773E3E31CC3CA

Date of Disbursement

10 / 28 / 2010

Amount of Each Disbursement this Period

137.71

**B.**

Full Name (Last, First, Middle Initial)

PNC Bank

Mailing Address 411 King St.

City  
Alexandria

State  
VA

Zip Code  
22314

Purpose of Disbursement  
Bank Service Charge

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** F0933DE84B6ABA94693

Date of Disbursement

11 / 01 / 2010

Amount of Each Disbursement this Period

3.00

**C.**

Full Name (Last, First, Middle Initial)

PNC Bank

Mailing Address 411 King St.

City  
Alexandria

State  
VA

Zip Code  
22314

Purpose of Disbursement  
Merchant Financial Adjustment

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 9C58D226758B027FB20

Date of Disbursement

11 / 02 / 2010

Amount of Each Disbursement this Period

99.95

**SUBTOTAL** of Disbursements This Page (optional) .....

240.66

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 46 / 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

**A.**

Full Name (Last, First, Middle Initial)

PNC Bank

Mailing Address 411 King St.

City  
AlexandriaState  
VAZip Code  
22314

Purpose of Disbursement

Credit Card Fee

Candidate Name

001

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: B0B35A41C5BB7853F32

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	2	/	2	0	1	0

Amount of Each Disbursement this Period

10.50

**B.**

Full Name (Last, First, Middle Initial)

PNC Bank

Mailing Address 411 King St.

City  
AlexandriaState  
VAZip Code  
22314

Purpose of Disbursement

Credit Card Fee

Candidate Name

001

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 5C4097E23CF3C7C904E

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	3	/	2	0	1	0

Amount of Each Disbursement this Period

10.16

SUBTOTAL of Disbursements This Page (optional) .....

20.66

TOTAL This Period (last page this line number only) .....

261.32

# **SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 47 / 47

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Gillibrand for Senate	<b>Transaction ID:</b> 73017B71127F0B89D2F <b>Date of Disbursement</b>																				
Mailing Address 236 Massachusetts Ave Suite 110	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	2		2	0	1	0												
City Washington State DC Zip Code 20002	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement 2010 General	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Candidate Name Kirsten E. Gillibrand	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NY District:																					
<b>B.</b> Full Name (Last, First, Middle Initial) Peters for Congress	<b>Transaction ID:</b> 02A372A732CB6F345AD <b>Date of Disbursement</b>																				
Mailing Address PO Box 226	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	9		2	0	1	0												
City Bloomfield Hills State MI Zip Code 48303	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement 2010 General	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Gary C. Peters	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 09																					
<b>C.</b> Full Name (Last, First, Middle Initial) Scott Murphy for Congress	<b>Transaction ID:</b> A961CD193B002254930 <b>Date of Disbursement</b>																				
Mailing Address 5 South Side Dr. #224	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	9		2	0	1	0												
City Clifton Park State NY Zip Code 12065	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement 2010 General	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Scott Murphy	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NY District: 20																					

**SUBTOTAL** of Disbursements This Page (optional) .....

7000.00

**TOTAL** This Period (last page this line number only) .....

7000.00